

# Exhibit B

IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF VERMONT

MISTY BLANCHETTE PORTER, M.D.,

Plaintiff,

vs.

Case No. 5:17-cv-194

DARTMOUTH-HITCHCOCK MEDICAL  
CENTER, DARTMOUTH-HITCHCOCK  
CLINIC, MARY HITCHCOCK  
MEMORIAL HOSPITAL, and  
DARTMOUTH-HITCHCOCK HEALTH,

Defendants.

**PLAINTIFF'S RESPONSE TO DEFENDANT MARY HITCHCOCK MEMORIAL  
HOSPITAL'S FIRST SET OF INTERROGATORIES PROPOUNDED ON PLAINTIFF  
MISTY BLANCHETTE PORTER**

Plaintiff Misty Blanchette Porter, M.D., ("Plaintiff" or "Dr. Porter"), pursuant to Rules 26 and 36 of the Federal Rules of Civil Procedure and by and through her counsel, Katherine B. Kramer, Esq., of Katherine Burghardt Kramer Law Office PLLC, and Geoffrey J. Vitt, Esq., of Vitt & Associates PLC, responds as follows to Defendant Mary Hitchcock Memorial Hospital's First Set of Interrogatories to Plaintiff.

**Defendants' Interrogatories and Plaintiff's Responses**

1. Identify each and every element of damages you allege to have suffered as a result of Defendants' alleged unlawful conduct, and for each element, please separately state the monetary value you assign to it and explain how you arrived at that figure, including in your explanation a statement of all premises, figures and/or assumptions underlying such figure(s).

**Response: Plaintiff will supplement this response. Plaintiff has retained an economic expert and will produce an expert report regarding her economic loss. Without waiving the right to supplement, Plaintiff identifies the following categories of damages:**

- **Reduced retirement benefits**
- **Loss of fringe benefits (e.g., health insurance coverage, accrued vacation benefits)**
- **Reduced income**
- **Cost of purchasing a second residence in Burlington closer to new employment, plus fees, renovation expense, utilities, costs of setting up a second residence (furnishings, household goods, appliances, etc.)**
- **Financial loss resulting from delay in academic promotion, along with professional reputational loss**
- **Emotional harm and non-economic loss**
- **Attorney's fees and costs of litigation**

2. State the amount of any loss of wages, income, or benefits you are claiming as a result of this lawsuit, and state with respect thereto:

- a. The total gross and net amount of each alleged loss;
- b. The method by which you computed the amount of the loss; and
- c. Identify each person who assisted you in computing or calculating such alleged loss.

**Response: Plaintiff will supplement this response. Plaintiff has retained an economic expert, Robert L. Bancroft, Ph.D., to assist in calculating her economic loss and will produce an expert report.**

3. Identify each and every entity or person for whom you have performed work or professional services, whether as an employee, consultant, or contractor, since November 1, 2015, including, if applicable, self-employment, and provide the following information related to each entity or person:

- a. Name and address of the entity or person;

- b. Your date of hire or the date on which you began providing work or professional services, as applicable, and the period of time during which you were employed or performed work or professional services;
- c. The rate of pay you earned while employed or while you performed work or professional services for the entity or person;
- d. A description of any other bonuses or fringe benefits you received or were eligible to receive as a result of your employment, work, or professional services including, but not limited to, insurance, retirement plans, stock plans, profit-sharing, reimbursement for expenses, and other benefits; and
- e. The date and reasons for the termination of the employment, consulting, or contracting relationship.

**Response:**

- **Dartmouth-Hitchcock Clinic, One Medical Center Drive, Lebanon, NH 03756**
  - Staff Physician \$305,539.00 annual salary
  - Employment start date: July 15th, 1996. As of June 3rd, 2017, my employment was involuntarily terminated, although I was designated as an employee on leave solely for benefits purposes.
  - Health, Dental, and Vision Insurance, life insurance, retirement benefit, identity theft insurance, vacation payout
- **University of Vermont Medical Center, 111 Colchester Avenue, Burlington, VT 05401**
  - Per Diem Physician
  - June 4th, 2017-current
  - \$150.00/hour increased to \$175.00/hour October 1st, 2017
  - No benefits
- **Baystate Medical Center, Inc., 759 Chestnut Street, Springfield, MA 01199**
  - Stipend for grand rounds speaker and reimbursement for travel expense

- May 15th, 2017
  - \$ 1,136.96
  - One-time stipend for speaking, time for travel, and reimbursement for mileage
  - AbbVie, Inc., 1 N. Waukegan Road, North Chicago, IL 60064
    - Consultant to Advisory Board
    - February 3-4, 2017
    - \$4,003.36 for an hourly consulting fee plus travel reimbursement
    - One-time engagement
4. Other than the entities or persons identified in your response to Interrogatory No. 18 [sic] above, state whether you have attempted to secure employment with any person, firm, or company and/or registered for employment with any employment agency or referral service since May 1, 2017. For each application or attempt to secure employment, provide:
- a. The names and addresses of any person, firm, company, employment agency, or referral service from whom or through whom you sought employment.
  - b. The nature or title of each job or position sought or inquired about;
  - c. The amount of compensation advertised or indicated by the prospective employer in connection with each job or position;
  - d. Whether the job was offered to you; and
  - e. Indicate which offers you did not accept, if any, and state the reasons why you rejected such offers.

**Response: None.**

5. State whether you have been unable to work for any reason for any period of time since May 1, 2017 and, for each such period, identify the dates of, and reason(s) for, your inability to work.

**Response: Objection, ambiguous whether the interrogatory seeks information regarding periods of time when Plaintiff was unable to work at all or unable to work full-time.**

**Without waiving the foregoing objection, Plaintiff responds as follows.**

**From May 29-June 13, 2017, I was unable to work at all due to treatment at the Mayo Clinic and associated recovery for my CSF leak. From June 28-July 11, 2017, I was unable to work at all due to treatment at the Mayo Clinic and associated recovery for my CSF leak. From September 26-November 13, 2017, I was unable to work at all due to treatment at the Mayo Clinic and associated recovery for my CSF leak.**

6. Identify each person whom you understand to possess information concerning either the claims or defenses in this action, or whom you intend to call as a witness at trial, and set forth the information you understand each person to possess regarding the claims or defenses in this action.

**Response: Plaintiff identifies those individuals identified in her initial disclosures. Without waiving the right to supplement, Plaintiff also identifies the following individuals, each of whom has personal knowledge regarding the subject matter of the complaint:**

- **David Seifer, MD; Albert Hsu, MD; Judith McBean, MD; Elizabeth Todd, ARNP, Navid Esfandiari, PhD; Valerie Lacroix; Sharon Parent, RN; Mary Martin, RN; Marlene Grossman, RN; Jamie Florence, LPN; Pamela Barlow, LPN; Donna Bedard; Dennis Dela Cruz; Pavel Zagadailov; Sarah Gibson; Jennifer Blaiklock; Leslie DeMars, MD; Heather Gunnell; Kathleen Mansfield; Kelly Mousley; Karen George, MD; Tim Fisher, MD; Michelle Roy; Paul Hanissian; Barry Smith, MD; Michelle Russell, MD; Emily Baker, MD; E. Rebecca Pshirrer, MD; Daniel Herrick; Ed Merrens; Maria Padin; Jenice Gonyea; Bonnie Nester; Dennis Seguin; Jennifer Carpenter; Megan Kitchen; Karen Boedeger; Debra Birenbaum, MD; Katrina Thorstensen, ARNP; Kathy Jacobs, ARNP**

- Various patients
- Various medical residents
- Members of the Value Institute
- Dr. Porter's care team for her disability, including Brooke Herndon; Stewart Tepper; Greg Morneau; Debra Drown; Adam Schwartz; and Mayo Clinic physicians and providers

7. Identify each person whom you expect to call as an expert witness at trial, and as to each such person:

- a. Describe the subject matter on which the expert is expected to testify;
- b. State the substance of the facts and opinions to which the expert is expected to testify and a summary of the grounds for each opinion; and
- c. Identify all documents, including any reports or communications, relating to the expert's testimony or opinions.

**Response: Robert L. Bancroft, Ph.D. He will testify as to Plaintiff's economic loss. Plaintiff will supplement once he has prepared a report.**

8. Identify each physician or other healthcare provider who has provided any medical, psychiatric, and/or psychological treatment to you, or from whom you have sought or with whom you have discussed such treatment, since November 1, 2015 and, for each physician or healthcare provider, identify:

- a. The names and addresses of each doctor, psychiatrist, psychologist, practitioner, hospital, clinic, and/or other institution, as applicable;
- b. The nature and extent of any treatment received, sought, or discussed;

- c. All diagnoses made concerning your physical, mental, or emotional condition(s) and the date of each diagnosis;
- d. All prognoses made concerning your physical, mental, or emotional condition(s) and the date of such prognosis; and
- e. The date(s) of any treatment(s);
- f. The length of time during which you received treatment; and
- g. Any medications taken by you as a result of the treatment.

**Response: Objection, information regarding Plaintiff's medical treatment unrelated to her disability is irrelevant and unduly invasive of privacy. Without waiving the foregoing and reserving the right to supplement, Plaintiff identifies the following treatment related to her disability.**

**Dartmouth-Hitchcock Medical Center, 1 Medical Center Drive, Lebanon, NH 03756**

▪ **M. Brooke Herndon, MD**

- **Primary care, including primary care support staff**
- **Office Visit: Evaluation for headache, neurologic symptoms**
- **Diagnosis: CFS leak with neurologic compromise**
- **Consults with neurology, neuroradiology, neuro-ophthalmology, neurocognitive occupational therapy, medical endocrinology, physical therapy**
- **Dates of treatment: 11/1/2015-6/30/2017**
- **Medication: acetaminophen, oxycodone, diazepam, ibuprophen**

▪ **Stephen J. Guerin, MD**

- **Radiology**
- **MRI Brain with/without contrast**
- **Interpretation: Intracranial hypotension, interval resolution of pachymeningeal thickening**
- **Dates of treatment: 12/14/2015, 5/20/16**



▪ **M. Brooke Herndon, MD**

- **Phone consults:** Ophthalmology Dr. Micheal Zegans, Neurology Drs. Barbara Nye and Jeffrey Cohen, MD.
- **Dr. Nye recommended hydration and caffeine and discussed blind blood path with IR or pain service.**
- **Date of consult: 12/15/2015**

▪ **Clifford J. Eskey, MD**

- **Radiology**
- **MRI Total Spine without Contrast**
- **Interpretation: Doral epidural fluid collection in the lower cervical and thoracic spine consistent with CSF leak.**
- **Date of treatment: 12/15/2015**
- **Medication prescribed: Valium pre-mediation**

▪ **Sivashakthi Kanagalingam, MD**

- **Neuro-ophthalmology**
- **Exam, automated visual field evaluation**
- **Diagnosis: Intermittent estropia consistent with a bilateral sixth nerve palsy.**
- **Dates of treatment: 12/16/2015, 3/9/2016**

▪ **David Pastel, MD and Mohsin Ghadiali, MD**

- **Radiology**
- **CT guided blood patch**
- **Impression: CT guided blood patch at thoracic level T1-T2 for CFS leak**
- **Dates of treatment: 12/17/2015**

▪ **Thomas N. Ward, MD**

- **Neurology including neurology support staff**
- **Neurologic examinations and review of imaging**

- **Impression:** CSF leak with associated neurologic symptoms, Low CSF volume headache, insomnia
- **Dates of treatment:** 12/22/2015 – 5/30/2016
- **Medication prescribed:** Naprosyn sodium, Vistaril, Theophylline, Hydroxyzine, Indomethacin, Prilosec, acetaminophen, Protriptyline
- **Gregory Morneau, OT**
  - **Occupational therapy and neuro-rehabilitation**
  - **Impression:** CSF leak, diplopia, attention or concentration deficit
  - **Dates of treatment:** 1/11/2016-4/3/2017
- **Debra Fournier, ARNP, CBIS**
  - **Neuro-rehabilitation**
  - **Impression:** CSF leak, diplopia, attention or concentration deficit
  - **Dates of treatment:** 1/8/2016-4/5/2016
- **Kathleen S. Robinson, PT**
  - **Physical Therapy**
  - **Cervicogenic headache**
  - **One visit**
  - **Date of treatment:** 1/2016
- **Sushela Chaidarun, MD**
  - **Medical Endocrinology, e-consult**
  - **Multiple endocrinology symptoms**
  - **Extensive blood work**
  - **Impression:** No evidence of hormonal disturbance
  - **Date of treatment:** 4/12/2016
- **Stewart Tepper, MD**
  - **Neurology**

- **Diagnosis: CSF Leak**
- **Referrals to Mayo Clinic Neurology, neuro-radiology, neuro-surgery, and follow up neurologic care**
- **Dates of treatment: 6/30/2016-current**

**MAYO CLINIC HEALTH SYSTEM, 200 1<sup>st</sup> Street SW, Rochester, MN**

▪ **Bahram Mokri, MD**

- **Specialty Neurology**
- **Impression: Predominantly second half of the day headaches with some but not typical orthostatic features, Valsalva headaches, Spontaneous CSF leak**
- **MRI head, MRI spine, Radioisotope cisternography, Consult Neurosurgery**
- **Dates of treatment: August 22, 2016 – December 31, 2017**

▪ **David G. Piepgras, MD**

- **Neurosurgery**
- **Impression: CSF hypotension syndrome, Spinal CSF leak**
- **Dynamic CT myelogram, recommended neurosurgical repair of CSF leak**
- **Dates of treatment: August 29-31, 2016**

▪ **Mohamad Bydon, MD**

- **Neurosurgery**
- **Impression: CSF hypotension syndrome, spinal CSF leak, most likely at T12-L1, second possibility at T11-12**
- **Recommendation: Hemilaminectomy, facetectomy, tubar minimally invasive right sided approach T12-L1**
- **Date of treatment: 8/31/2016**

▪ **Operative Procedure**

- **Neurosurgical repair (Hemilaminectomy, facetectomy, tubar minimally invasive right sided approach T12-L1) hospitalization, and post-operative care**
- **General anesthesia by anesthesia staff, post-pain medication including oxycodone and diazepam**
- **Dates of treatment: 9/6/2016-11/2/2016**
  
- **Office visit**
  - **Impression: Slow persistent CSF leak, post CT guided blood patch of delayed CSF leak**
  - **Date: 1/5/2017**
  
- **Office Visit**
  - **Impression: Spontaneous CSF leak status post repair T12-L1, September 6, 2016, #2 Status post myelogram demonstrating resolution of fast leak but with small delayed leak and status post blood patch on January 4, 2017**
  - **Recommendation: Dynamic CT myelogram, repeat CT guided blood patch**
  - **Date: 5/31/2017**
  
- **Office Visit**
  - **Impression: She has undergone two blood patches since her right T12 nerve root sleeve repair which have given her improvement in symptoms. However, the symptoms have recurred. Although the nerve root sleeve leak appears to be controlled, she does have a left ventral T12-L1 leak.**
  - **Impression: Third blood patch. If that third blood patch works, great; if it does not work, then we need to consider a left ventral T12-L1 mesial facetectomy and ventral exploration for repair of leakage.**
  - **Date: 6/28/2017**

▪ **Telephone call:**

- **Impression: Recurrence of symptoms following blood patch, plan for surgical repair.**
- **Date: 8/7/2017**

▪ **Operative procedure**

- **Procedure: 1. Left T12 hemilaminectomy. 2. Left T12-L1 mesial facetectomy. 3. Left T12-L1 partial laminotomies. 4. Left T12-L1 closure of spontaneous CSF leak.**
- **Operative procedure, hospitalization, and post-operative care**
- **General anesthesia by anesthesia staff, post-pain medication, oxycodone and diazepam**
- **Surgery Date: 9/27/2017**
- **Recovery: 9/27/2017 – 11/15/2017**

▪ **Gary M. Miller, MD**

- **Neuro-radiology**
- **MRI of head**
- **Impression: 1. Interval resolution of intracranial imaging findings of CSF hypotension since 12/14/2015. 2. Persistent extradural fluid collection throughout the cervical and visualized thoracic spine is worrisome for persistent CSF leak.**
- **Date of treatment: 8/23/2016**

▪ **Patrick H. Luetmer, MD**

- **Neuro-radiology**
- **MRI of spine**
- **Impression: Epidural fluid collection extends from the cervical spine inferiorly to the level of at least the upper body of L5**
- **Date of treatment: 8/24/2016**

▪ **Padraig O. Morris, MBBCh**

- Neuro-radiology
- Head MRI: Normal with microvascular changes consistent with migraine HA
- Date of treatment: 5/30/2017

▪ **Jeremy K. Cutsforth-Gregory, MD**

- Neurology Specialty Evaluation
- Impression: #1 Spontaneous CSF leak, status post surgical repair at T12-L1 on September 6, 2016 #2 Persistent orthostatic symptoms suggestive of persistent slow CSF leak
- Recommendation: Dynamic CT myelogram and repeat blood patch
- Date of treatment: 5/31/2017

▪ **Peter Kalina, MD**

- MRI of Spine
- Impression: T12 fluid collection
- Date of treatment: 5/31/2017

▪ **Jonathan M. Morris, MD**

- Neuro-radiology
- Dynamic CT myelogram
- Impression: High flow CSF leak at T12-L1 and probable second ventral leak at T12
- Date of treatment: 8/30/2016

▪ **Jonathan M. Morris, MD**

- Dynamic CT myelogram and CT guided targeted blood patch
- Impression: Delayed low flow leak ventral to cord at T12-L1
- Intraoperative sedation and pain medication
- Date of treatment: 1/4/2017

- **Christopher H. Hunt, MD**
  - Neuro-radiology
  - NM Cisternogram
  - Date of treatment: 8/26/2016
  
- **Carrie Carr, MD**
  - Neuro-radiology
  - Dynamic CT myelogram and targeted blood patch
  - Intraoperative sedation and pain medication
  - Impression: Contrast is first seen accumulating in the LEFT ventral epidural space at T12-L1. With time, this further accumulates and spreads to involved the ventral epidural space in a similar distribution as the ventral epidural fluid collection on MRI
  - Date of treatment: 6/01/2017
  
- **Jared T. Verdoorm, MD**
  - Neuro-radiology
  - Targeted Blood Patch and fibrin glue injection about the site of the T12-L1 CSF leak
  - Date of treatment: 6/29/2017
  
- **Colleen M. Musolf, ARNP, CNP, MSN**
  - Orthopedic Surgery
  - 11/2/2016
  - Hip Pain
  - Impression: SI joint inflammation
  
- **Tim J. Lamer, MD**
  - Anesthesiology
  - Impression: Lumbar spondylosis with SI joint pain

- SI joint injection
- 11/2/2016

**Other regional NH and VT Providers**

- **Debra Drown, PSY.D**
  - 20 West Park Street, Lebanon, NH
  - Psychologist
  - Nov 1, 2015-current
- **Adam J. Schwarz, MD**
  - Primary Care
  - Hanover Continuity Clinic, 45 Lyme Road, Suite 104, Hanover, NH
  - June 2017-current
- **Tanner Wallace, DMD**
  - Neal Wallace Dental, 73 Lyme Road, Hanover, NH
  - Nov 1, 2017-current
  - General dentistry, jaw clenching, tooth pain, night guard
- **Brooke Blicher, DMD**
  - Upper Valley Endodontics, 205 Billings Farm Road, White River Junction, VT
  - Summer 2017
  - Tooth pain, cracked molar due to stress from CSF leak and resulting impact on work
- **Champlain Valley Oral and Maxillofacial Surgery, 118 Tilley Drive, South Burlington, VT**
  - August 2017, Molar extraction and dental implant consult
  - IV sedation and post-operative pain medication




9. Identify each person who assisted in the preparation of responses to these interrogatories. Include in your response a list of the interrogatories he or she assisted with and the nature of the assistance (including any information) provided.

**Response: Katherine B. Kramer, Esq., Geoffrey J. Vitt, Esq., and Julia Korkus (paralegal) helped with all responses.**

[signature on following page]

DATED at Norwich, Vermont, in the County of Addison, this 20<sup>th</sup> day of April 2018.

  
Misty Blanchette Porter, M.D.  
Plaintiff

STATE OF VERMONT  
COUNTY OF WINDSOR, SS.

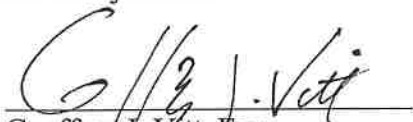
Subscribed and sworn to me this 20<sup>th</sup> day of April, 2018.

Before me:

  
Notary Public

Commission Expires: 2/10/2019

As to objections:

  
Geoffrey J. Vitt, Esq.

**CERTIFICATE OF SERVICE**

I hereby certify that on April 23, 2018, I caused a true copy of the above document to be served upon the attorneys of record for Defendants via electronic mail and first-class mail.

/s/ Geoffrey J. Vitt

Geoffrey J. Vitt

UNITED STATES DISTRICT COURT  
DISTRICT OF VERMONT

MISTY BLANCHETTE PORTER,  
M.D.,

Plaintiff,

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DARTMOUTH-HITCHCOCK  
MEDICAL CENTER,  
DARTMOUTH-HITCHCOCK  
CLINIC, MARY HITCHCOCK  
MEMORIAL HOSPITAL, and  
DARTMOUTH-HITCHCOCK  
HEALTH,

Defendants.

Docket No. 5:17-CV-194

**DISCOVERY CERTIFICATE**

I certify that Plaintiff's Response to Defendant Mary Hitchcock Memorial Hospital's First Set of Interrogatories propounded on Plaintiff Misty Blanchette Porter has been served by regular mail, postage pre-paid, and via e-mail to the following:

Donald W. Schroeder, Esq.  
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Dated: April 23, 2018

/s/Geoffrey J. Vitt

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